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CONFIRMATION NO. 1838

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| SERIAL NUMBER 10/672,408 | FILING OR 371(c) DATE 09/26/2003 RULE | CLASS 435 | GROUP ART UNIT 1645 | ATTORNEY DOCKET NO. CIT1360-3 |
| APPLICANTS Duncan Odom, Cambridge, MA; | | | | |
| ** CONTINUING DATA ***** This application is a DIV of 10/002,389 11/30/2001 PAT 6,638,756 which claims benefit of 60/297,995 06/13/2001 and claims benefit of 60/251,523 12/05/2000 | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 12/30/2003 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____ | | STATE OR COUNTRY MA | SHEETS DRAWING 26 | TOTAL CLAIMS 5 |
| | | | | INDEPENDENT CLAIMS 1 |
| ADDRESS Lisa A. Haile, J.D., Ph.D. DLA PIPER RUDNICK GRAY CARY US LLP 4365 Executive Drive Suite 1100 San Diego ,CA 92121-2133 | | | | |
| TITLE CHIMERIC CELL-TARGETING PATHOGENIC ORGANISM AND METHOD OF THERAPEUTIC USE | | | | |
| FILING FEE RECEIVED 675 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |